

COUNTY OF SAN BERNARDINO

STANDARD PRACTICE

BEHAVIORAL HEALTH

SUBJECT REPORTING CLINICAL ISSUES RELATED TO QM TO APPROPRIATE COMMITTEE

NO. 15-1.20 Rev

ES McREYNOLDS, Director

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FFECTIVE 8/94

R. Bulgarella EFFECTIVE

James M- Regnolds

I. PURPOSE

To ensure that clinical issues related to quality management (QM) are directed through the proper channels, and that appropriate recommendations and actions, if necessary, occur. This procedure does not include clinical issues referred by the Utilization Reviewers to the Working Quality Improvement Committee.

BY

II. POLICY

Clinical issues related to quality management should be directed to the Quality Management Committee to determine whether action is needed to resolve the issues.

III. PROCEDURES

- A. DBH staff who have concerns with issues relating to quality management should bring them to the attention of their Program Manager or Clinic Supervisor.
- B. Program Managers or Clinic Supervisors will, if warranted, officially notify the Quality Management Committee Chair by memo with a copy to the QM Coordinator.
- C. The Quality Management Committee will discuss the issue and, if action is necessary and a task force is needed, an ad hoc committee will be assigned. Representation from DBH programs may be needed in some cases.
 - 1. The ad hoc committee representative will submit the findings to the appropriate Deputy Director for discussion at the Program Managers' meeting if it will impact other programs.
 - 2. The ad hoc committee will finalize the report with a recommendation to the Quality Management Committee for review and approval.
- D. If the issue does not require study by an ad hoc committee, decision to resolve the issue will be made by the Quality Management Committee.

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E. Issues and concerns regarding medication administration identified during reviews will be referred to physician members of the appropriate committee. S(he) will then review the case and make recommendations as to appropriateness of the practice. This will then be discussed at the Medication Monitoring Committee meeting where the final decision or action shall be taken.

The Deputy Director of Medical Services will ensure that the practitioner is notified and take whatever action is needed for quality of care issues.

F. A written response will be sent to the Clinic Supervisor and Program Manager as appropriate.

The Quality Management Committee will distribute the final results through the Program Managers for implementation of procedures, if appropriate. As a follow up, Program Managers may be asked to prepare a written report to the Quality Management Committee on the effects of the procedure six months after implementation. A Program Manager representative will be responsible for reporting to the Quality Management Committee.

G Quality management issues and concerns will continue to be reported at the Quality Management Committee meeting until resolution is complete.